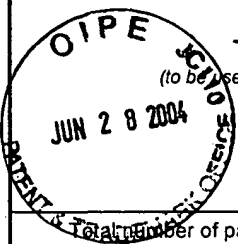


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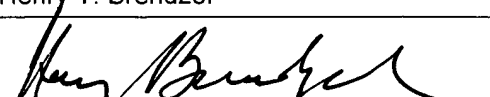
 <p><b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)</p>	Complete if Known	
	Application Number	09/711,549
	Filing Date	11/13/2000
	First Named Inventor	Hrair Aldermeshian
	Examiner Name	Duc T. Duong
	Group/Art Unit	2663
Total number of pages in this Submission: this page, plus <b>11</b>		Attorney Docket ID Aldermeshian 1999-0795

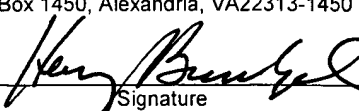
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ENCLOSURES (check all that apply)		
<p>If Fee Form is not included, but a fee is due, the Commissioner is Authorized to charge Deposit Account No 500732 of Henry T. Brendzel, and consider that appropriate requests have been made.</p> <p><input type="checkbox"/> Fee Form (<input type="checkbox"/> Check included)</p> <p><input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final</p> <p><input type="checkbox"/> Affidavit(s)/Declaration(s)</p> <p><input checked="" type="checkbox"/> Extension of Time Request</p> <p><input type="checkbox"/> Information Disclosure Statement</p> <p><input type="checkbox"/> Certified Copy of Priority document(s)</p> <p><input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.2 or 1.53</p>	<p><input type="checkbox"/> Declaration (no Missing Parts Notice)</p> <p><input type="checkbox"/> Assignment Papers (for an Application)</p> <p><input type="checkbox"/> Drawing(s)</p> <p><input type="checkbox"/> Licensing-related Papers</p> <p><input type="checkbox"/> Petition Routing Slip (TO/SB/69) and Accompanying Petition</p> <p><input type="checkbox"/> To Convert a Provisional Application</p> <p><input checked="" type="checkbox"/> Power of Attorney, Revocation or Change of Correspondence Address</p> <p><input type="checkbox"/> Express Abandonment</p> <p><input type="checkbox"/> Terminal Disclaimer</p> <p><input type="checkbox"/> To Convert to Statutory Invention Registration</p>	<p><input checked="" type="checkbox"/> Postcard(s)</p> <p><input type="checkbox"/> Small Entity Statement</p> <p><input type="checkbox"/> Request for a Refund</p> <p><input type="checkbox"/> After Allowance Communication to group</p> <p><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences</p> <p><input type="checkbox"/> Appeal Communications to Group (Appeal Notice, Brief, Reply Brief)</p> <p><input type="checkbox"/> Proprietary Information</p> <p><input type="checkbox"/> Status Letter</p> <p><input type="checkbox"/> Other</p>

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual Name	Henry T. Brendzel	
Signature		Date 6/23/04

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service as service in an envelop with addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA22313-1450 on this date: 6/24/04		
HENRY BRENDZEL		6/23/04
Name of Person Signing	Signature	Date

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